PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/565229

| 10/ 5 4 | | | | | | | | | | | | | |
|---|--|---|----------------|---------------|---------------|------------------|----------|---|------------------------|----|----------------------------|------------------------|--|
| | | CLAIMS A | S FILED - | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
| บร | NATIONAL S | TAGE FEES | (Column | 11) | (Column 2) | | 1 [| RATE | FEE | | RATE | FEE | |
| BASIC FEE | | | | | | | | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | | | EXAM, FEE | | | EXAM. FEE | 200 | |
| SEARCH FEE | | | - | | | | ┧┝┈ | SEARCH FEE | | | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | min | ıs 100 = | | / 50 = | ┨┝ | \$ 125 = | | | X \$ 250 = | 700 | |
| | | | 1.0 | nus 20 = | | 7 50 - | ┨┞ | - | | OR | X \$ 50 = | | |
| TOTAL CHARGEABLE CLAIMS | | | +//_ | | | | ┨┝ | \$ 25 = | | | · | | |
| INDEPENDENT CLAIMS | | | 2 m | inus 3 = | * | | <u>`</u> | \$ 100 = | : | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | ESENT | | | | J L⁺ | \$ 180 = | | OR | + \$ 360 = | | |
| * If | the difference | in column 1 is | less than zero | , enter "(| O" in co | lumn 2 | | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | | IBER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = |] [× | (\$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X | \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 1 + | \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | · | ТО | TAL ADDIT. FFF | | OR | TOTAL ADDIT. | | |
| | | | | | | | | | | • | | | |
| | · | (Column 1) | | (Colu | | (Column 3) | . — | | | | | | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUM PREVIO | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | × | (\$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X | \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT (| | | | CLAIM | | 1 | \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | TAL ADDIT. FFF | | OR | TOTAL ADDIT. | | |
| | | | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previousty Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previousty Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previousty Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |